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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	M-10685-1P US
	First Named Inventor or Application Identifier	Shing Lee, Haiming Wang, Adam Norton and Mehrdad Nikoonahad
	Title	SYSTEM FOR MEASURING POLARIMETRIC SPECTRUM AND OTHER PROPERTIES OF A SAMPLE
	Express Mail Label No.	EL 751261242 US

jc929 U.S. PTO
09/778245
02/06/01

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, D.C. 20231																														
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form - <i>see page 2 of this form.</i> (Submit an original, and a duplicate for fee processing)</p> <p>2. Application (COPY):</p> <p><input checked="" type="checkbox"/> Specification: (preferred arrangement set forth below) Descriptive title of the Invention, Cross References to Related Applications, Reference to Microfiche Appendix, Background of the Invention, Brief Summary of the Invention, Brief Description of the Drawings, and Detailed Description (all totaling 20 pages) Appendix(ces) ____, ____, & ____ (____ pages)</p> <p><input checked="" type="checkbox"/> Claim(s) 14 pages</p> <p><input checked="" type="checkbox"/> Abstract of the Disclosure 1 page</p> <p><input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 6]</p> <p>3. Oath or Declaration <input type="checkbox"/> unsigned [Total Pages 3]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed)</p> <p>c. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input type="checkbox"/> Microfiche Computer Program Appendix consisting of ____ pages of microfiche containing ____ frames on each page in accompanying envelope.</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) ____ pages</p> <p>9. <input type="checkbox"/> 37 CFR §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (combined when there is an Assignee with Patent Declaration above.)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS) & <input type="checkbox"/> PTO-1449 <input type="checkbox"/> ____ Copies of IDS Citations/References</p> <p>12. Preliminary Amendment ____ pages</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)</p> <p>14. Small Entity Status</p> <p><input type="checkbox"/> Small Entity Statement Enclosed ____ pages</p> <p><input type="checkbox"/> Statement filed in prior application; and status still proper and desired</p> <p><input type="checkbox"/> Is no longer claimed.</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other: <input type="checkbox"/> Submission of Formal Drawings</p> <p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information and a preliminary amendment: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional of prior application No. 09/246,922 Filed on February 9, 1999 PRIOR APPLICATION INFORMATION: Examiner: Group Art Unit:</p> <p>18. CORRESPONDENCE ADDRESS</p> <p>Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below</p> <table border="1"><tr><td>Name</td><td colspan="3">James S. Hsue</td><td colspan="2">Reg. No. 29,545</td></tr><tr><td>Attorneys for Applicant</td><td colspan="5">Skjervén Morrill MacPherson LLP</td></tr><tr><td>Address</td><td colspan="5">3 Embarcadero Center, Suite 2800</td></tr><tr><td>City</td><td>San Francisco</td><td>State</td><td>CA</td><td>Zip Code</td><td>94111</td></tr><tr><td>Country:</td><td>United States</td><td>Telephone</td><td>(415) 217-6000</td><td>Fax</td><td>(415) 434-0646</td></tr></table>		Name	James S. Hsue			Reg. No. 29,545		Attorneys for Applicant	Skjervén Morrill MacPherson LLP					Address	3 Embarcadero Center, Suite 2800					City	San Francisco	State	CA	Zip Code	94111	Country:	United States	Telephone	(415) 217-6000	Fax	(415) 434-0646
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19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)		(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS
88	TOTAL CLAIMS (37 CFR 1.16(c))	-20	=	68	x	\$18	=	\$1,224.00
4	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	=	1	x	\$80	=	\$80.00
<input type="checkbox"/>	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d))				+	\$260.00	=	
						BASIC FEE (37 CFR 1.16(a))	=	\$ 710.00
						Total of above Calculations	=	\$ 710.00
						Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28).	=	\$0
						TOTAL	=	\$2,014.00

20. **FEES:** The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. **19-2386:**

- a. ☒ Fees required under 37 CFR 1.16. (U.S. Application Filing Fees)
b. ☐ Fees required under 37 CFR 1.17. (Conditional Extension of Time Fees)
c. ☐ Fees required under 37 CFR 1.18. (Patent Issue Fees)

21. ☐ Other: _____

NOTE:

The prior application's correspondence address will carry over to this UPA UNLESS a new correspondence address is provided below.

22. NEW CORRESPONDENCE ADDRESS

X Customer Number or Bar Code Label



New correspondence address below

NAME	27869		
ADDRESS			
CITY	STATE	ZIP CODE	
COUNTRY	TELEPHONE	FAX	

23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Skjerven Morrill MacPherson LLP 3 Embarcadero Center, Suite 2800 San Francisco, CA 94111 Tel. (415) 217-6000 Fax. (415) 434-0646	
Date:	February 6, 2001
Name	James S. Hsue Reg. No. 29,545
Signature	
Express Mail Label No.	EL 751261242 us